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Form **990**



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

	or the 2017 c	alendar year, or tax year beginning 01-01-2017 , and ending 12-31 C Name of organization	1-2017	D Employe	r identifi	cation number
	dress change	AMERICAN FUEL AND PETROCHEMICAL MANUFACTURERS		53-0115		
	me change			33-0113	370	
	tial return	Doing business as				
	al return/terminated nended return	Number and shoot (as D.O. have it was it is not delice and to shoot address.)		E Telephone	number	
	plication pending	Number and street (or P.O. box if mail is not delivered to street address) Room/sui 1800 M STREET NW NO 900	te	(202) 45	7-0480	
		City or town, state or province, country, and ZIP or foreign postal code		(202) 43	7 0 100	
		WASHINGTON, DC 20036		G Gross rece	eipts \$ 61	,265,104
		F Name and address of principal officer:	H(a) Is this	a group retu	urn for	
		CHET THOMPSON 1800 M STREET NW NO 900	subord	inates?		Yes No
		WASHINGTON, DC 20036	H(b) Are all include		!S	☐ Yes ☐ No
I Ta	x-exempt status:	☐ 501(c)(3)			st. (see	instructions)
	ebsite: ► WW		H(c) Group			•
K Forr	n of organization	: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of format	ion: 1961	M State o	of legal domicile: DE
Pa	rt I Sum	mary				
Activities & Governance	-PROMOTI INFORMAT AS AN EFF	scribe the organization's mission or most significant activities: ING THE GENERAL WELFARE OF ITS MEMBERS BY GATHERING AND DISSEN FION AND STATISTICS RELATING TO THE PETROLEUM REFINING AND PETR FECTIVE CHANNEL OF COMMUNICATION OF INDUSTRY INFORMATION AMO ENT, AND THE PUBLIC.	ROCHEMICAL MA	ANUFACTUR	RING IND	DUSTRIESSERVING
Mem						
9	2 Check thi					
×8		of voting members of the governing body (Part VI, line 1a)			3	69
es		of independent voting members of the governing body (Part VI, line 1b) .			4	68
¥		nber of individuals employed in calendar year 2017 (Part V, line 2a)			5	67
Act		nber of volunteers (estimate if necessary)			6	80
		elated business revenue from Part VIII, column (C), line 12		•	7a	0
		ated business taxable income from Form 990-T, line 34			7b	0
	D Net unite	acca basiness taxable medite from 10th 1950 1, line 34 1 1 1 1 1	Prio	r Year		Current Year
	8 Contribut	ions and grants (Part VIII, line 1h)	- 1110	ı ıcuı	0	0
2		service revenue (Part VIII, line 2g)	-	31,476,7	_	41,857,681
Revenue				267,7	_	1,427,119
æ		ent income (Part VIII, column (A), lines 3, 4, and 7d)				
		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,98 31,746,48		1,308 43,286,108
		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		51,740,40		
		nd similar amounts paid (Part IX, column (A), lines 1–3)			0	1,187,359
		paid to or for members (Part IX, column (A), line 4)		9,781,5	U E4	11,508,910
Expenses		other compensation, employee benefits (Part IX, column (A), lines 5–10)		9,/81,5	04	
8	_	anal fundraising fees (Part IX, column (A), line 11e)			U	0
윲		raising expenses (Part IX, column (D), line 25) 0		45 400 04		0.4 550 000
held		penses (Part IX, column (A), lines 11a–11d, 11f–24e)		16,482,32	_	24,572,828
		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		26,263,87	_	37,269,097
F &	19 Kevenue	less expenses. Subtract line 18 from line 12	Reginning o	5,482,60 f Current Ye	-	6,017,011 End of Year
Net Assets or Fund Balances			Degining 0	. Junent le		End of Teal
Bak	20 Total ass	ets (Part X, line 16)		33,329,5	52	35,462,967
nd a	21 Total liab	ilities (Part X, line 26)		20,575,87	75	15,606,767
žZ	22 Net asset	s or fund balances. Subtract line 21 from line 20		12,753,67	77	19,856,200
Par	t II Sign	ature Block	•			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2018-04-12 Signature of officer Sign Here GERRY VAN DE VELDE CFO Type or print name and title Print/Type preparer's name JOHN HUSKINS Preparer's signature Date PTIN Check 🔲 if JOHN HUSKINS 2018-04-12 P01081531 **Paid** self-employed Firm's name > JOHNSON LAMBERT LLP Firm's EIN > 52-1446779 **Preparer** Firm's address 4242 SIX FORKS RD STE 1500 Phone no. (919) 719-6400 **Use Only** RALEIGH, NC 27609

For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

Cat. No. 11282Y

Form **990** (2017)

Yes

orm	990 (2017)	Page 2
Par	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	. 🔻
1	Briefly describe the organization's mission:	
ECOI NITH ENVI SECU	CATE THE PUBLIC AND POLICYMAKERS ABOUT THE VITAL ROLE OF THE REFINING AND PETROCHEMICAL INDUSTRIES IN THE NATION'S NOMY AND OUR CONTRIBUTION TO IMPROVEMENTS IN THE QUALITY OF LIFE SERVE AS A STRONG ADVOCACY VOICE FOR OUR MEMBE I GOVERNMENT OFFICIALS, THE MEDIA AND THE PUBLIC TO PROMOTE POLICIES THAT BALANCE ENERGY SUPPLY NEEDS WITH RONMENTAL GOALS, FACILITATE TECHNICAL ADVANCEMENT AND CONTINUED PROGRESS IN SAFETY, ENVIRONMENTAL PERFORMANC JRITY, IN PART THROUGH WORLD-CLASS MEETINGS AND CONFERENCES SEVERAL OF WHICH ARE THE FOREMOST INDUSTRY MEETING WORLD.	ERS E AND
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	☑ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	5.
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
	ADVOCACY - AFPM'S GOAL IS TO ADVANCE A POLICY AGENDA THAT ALLOWS OUR INDUSTRIES TO GROW AND MANUFACTURE PRODUCTS THAT IMPROV A WAY THAT PROTECTS THE SAFETY OF OUR WORKERS, OUR COMMUNITIES AND THE ENVIRONMENT. WE STRIVE TO INFORM, EDUCATE AND ADVOCATI LAWMAKERS, REGULATORY AGENCIES, THE MEDIA, AND GENERAL PUBLIC ON A VARIETY OF ISSUES THAT IMPACT THE REFINING AND PETROCHEMICAL INDUSTRIES.	E TO
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
	MEETINGS - AFPM OFFERS A WIDE VARIETY OF MEETINGS AND CONFERENCES THROUGHOUT THE YEAR TO FACILITATE TECHNICAL ADVANCEMENTS AN CONTINUED PROGRESS IN SAFETY, ENVIRONMENTAL PERFORMANCE AND SECURITY FOR THE REFINING AND PETROCHEMICAL INDUSTRIES.	D
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
70	REPUTATIONAL ENHANCEMENT - A PROCESS SAFETY PROGRAM WHERE MEMBERS SHARE INFORMATION IN AN EFFORT TO MAXIMIZE FACILITY AND EMPSAFETY.	PLOYEE
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
	BUSINESS ENHANCEMENT	
4d	Other program services (Describe in Schedule O.)	
-	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶	

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No

Part IV Checklist of Required Schedules (continued)

		Ī	Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV </i>	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
			orm 00	n (2017)

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance								
	Check if Schedule O contains a response or note to any line in this Part V								
			Yes	No					
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 36								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b							
4a	4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
b	b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No					
c	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?								
6a	6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?								
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?								
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c							
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8							
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.								
	12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								

а	Is the organization licensed to issue qualified health plans in more than one state? Note. additional information the organization must report on Schedule O.	ne instructions for	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b					
С	Enter the amount of reserves on hand	13c					
14a	.4a Did the organization receive any payments for indoor tanning services during the tax year?						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation	n in Sc	chedule O	14b			

Form 990 (2017)			Page 6

Par	Tt VI Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			\checkmark
Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year as 1a 69			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 68	8		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? \cdot	5		No
6	Did the organization have members or stockholders?	6	Yes	,
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more			
	members of the governing body?	7a	Yes	
b	persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	. 1	
		C COUC		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No No
10a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			
10a b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a		
10a b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10a 10b	Yes	No
10a b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13	10a 10b		No
10a b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10a 10b	Yes	No
10a b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10a 10b 11a	Yes	No
10a b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	10a 10b 11a 12a 12b	Yes	No
10a b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No
10a b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No
10a b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No No

- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶GERALD VAN DE VELDE 1800 M STREET NW STE 900 WASHINGTON, DC 20036 (202) 457-0480

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related	more pers	than on is	one both	not box n an	check , unle office ustee	ess er	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) JOSEPH GORDER VICE CHAIR	5.00	Х		х				0	0	0
(2) LAWRENCE ZIEMBA CHAIR (TO SEP '17)	5.00	Х		х				0	0	0
(3) GREGORY J GOFF PAST CHAIR	5.00	х		х				0	0	0
(4) KEVIN BROWN VICE PRESIDENT (TO APR '17)	5.00	х		х				0	0	0
(5) DANIEL COOMBS VICE PRESIDENT (FROM APR '17)	5.00	х		х				0	0	0
(6) MICHAEL COYLE VICE PRESDIENT	5.00	х		х				0	0	0
(7) GEORGE DAMIRIS VICE PRESIDENT	5.00	х		х				0	0	0
(8) GARY R HEMINGER VICE PRESIDENT	5.00	Х		х				0	0	0
(9) ROBERT HERMAN VICE PRESIDENT (FROM SEP '17)	5.00	Х		х				0	0	0
(10) JACK LIPINSKI VICE PRESIDENT	5.00	Х		х				0	0	0
(11) JAMES S LOVING VICE PRESIDENT	5.00	Х		х				0	0	0
(12) THOMAS J NIMBLEY VICE PRESIDENT	5.00	X		Х				0	0	0

(A) Name and Title	(B) Average hours per week (list any hours for	more pers	than on is	one both	box n an	check c, unle office ustee	ess er	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the	
	related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			organization and related organizations	
(13) PATRICK QUARLES VICE PRESIDENT (TO APR '17)	5.00	Х		х				0	0	0	
(14) JEFF RAMSEY VICE PRESIDENT	5.00	Х		х				0	0	0	
(15) RODRIGO ABRAMOF DIRECTOR	2.00	Х						0	0	0	
(16) HEIDI ALDERMAN DIRECTOR (TO OCT '17)	2.00	х						0	0	0	
(17) KHALID ALMAZYED DIRECTOR (TO SEP '17)	2.00	Х						0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related	more perse and	than on is	one both ecto	not box h an or/tr	office ustee	ess er)	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
(18) MJ AGUIAR	2.00	Х						0	0	0
DIRECTOR (FROM AUG '17)										
(19) EDUARDO ASSEF	2.00	х						0	0	0
DIRECTOR (TO MAR '17) (20) BOB BAIRD	2.00									
DIRECTOR	2.00	l X						0	0	0
(21) RAYMON C BARLOW	2.00							_		
DIRECTOR		×						0	0	0
(22) ALBERT BENINATI	2.00	Х						0	0	0
DIRECTOR (TO JUL '17)		^						· ·		
(23) MICHAEL BERRY	2.00	Х						0	0	0
DIRECTOR (TO JUN '17) (24) RAYMOND L BROOKS										
	2.00	X						0	0	0
DIRECTOR (25) GRAEME BURNETT	2.00									
DIRECTOR	2.00	X						0	0	0
(26) ALBERT CHAO	2.00	х						0	0	0
DIRECTOR		^						0	0	0
(27) EDWARD CONNORS	2.00	X						0	0	0
DIRECTOR (TO FEB '17) (28) RAPHAEL CRAWFORD					-					
DIRECTOR	2.00	X						0	0	0
(29) DOUGLAS H CULPON	2.00	.,								
DIRECTOR		X						0	0	0
(30) JOHN DEARBORN	2.00	Х						0	0	0
DIRECTOR (TO SEP '17)		^						Ü		
(31) EDWARD J DINEEN	2.00	Х						0	0	0
DIRECTOR (32) DAVID C DOTSON		<u> </u>					_			
	2.00	Х						0	0	0
DIRECTOR (33) CLINT W ENSIGN	2.00				\vdash					
DIRECTOR	2.00	×						0	0	0
(34) CHRISTOPHE GERONDEAU	(B) 2.00	.,		(C)				(D) 0	(E) 0	(F) ₀
DIRECTOR Name and Title	···Average ····	····^Pos	ition	(do	not	check		Reportable	Reportable	Estimated
(35) ANDY JOHN GOSSE	hours per week (list:00		on is	both	an	office	r	compensation from the	from related 0	compensation 0
DIRECTOR	any hours for related		a dir					organization (W- ^o 2/1099-MISC)	organizations (W- 2/1099-	from the organization and
(36) FREDEREC C GREEN	organizations0 below-dotted- line) 2.00	indi or d	ins	Officer	Key	Highest compens employee	Former	0	MISC) 0	related ₀
DIRECTOR (37) PAUL HUANG	line)	fing wide	Institutional Trustee	190	Key employee	nest koye	ner			organizations
	2.00	ğ Ž	iona		ploy	ee or		0	0	0
DIRECTOR (38) MIKE HUMBY		- E	ıl Tru		/ 9 9	npe				
DIRECTOR (FROM JUN '17)	2.00	₩	uste			ensat		0	0	0
(39) JOSEPH ISRAEL	2.00		6			ted				
	2.00	X			1				0	<u> </u>

DIRECTOR		 	1	l	I	ı	I	-		-
(40) NAUSHAD JAMANI	2.00									
DIRECTOR	2.00	X						0	0	0
(41) COREY JOHNSON										
	2.00	Х						0	0	0
DIRECTOR (FROM OCT '17) (42) MARK R KEIM										
	2.00	Х						0	0	0
DIRECTOR (42) MARK LACUYER										
(43) MARK LASHIER	2.00	Х						0	0	0
DIRECTOR (TO SEP 17)										
(44) KENDRA LEE	2.00	Х						0	0	0
DIRECTOR										
(45) REBECCA LIEBERT	2.00	х						0	0	0
DIRECTOR	•••	^						U	Ü	0
(46) GLENN LIOLIOS	2.00	V						0	0	0
DIRECTOR		×						0	U	U
(47) JIM MACALUSO	2.00									
DIRECTOR		X						0	0	0
(48) BRUCE MARCH	2.00									
DIRECTOR (TO JUL '17)	2.00	х						0	0	0
(49) DOUGLAS MAY										
	2.00	Х						0	0	0
DIRECTOR (50) JOHN MCINTOSH		<u> </u>			-		-			
	2.00	Х						0	0	0
DIRECTOR										
(51) PAUL MIKESELL	2.00	Х						0	0	0
DIRECTOR										
(52) MARK G NIKOLICH	2.00	Х						0	0	0
DIRECTOR		^						0	o o	O .
(53) KRIS PATRICK	2.00	v								
DIRECTOR	•••	×						0	0	0
(54) ROBERT PETERSON	2.00									
DIRECTOR		X						0	0	0
(EE) THOMAC DETTI	2.00									
(33) INUMAS PETTI	2.00	X						0	0	0
DIRECTOR (FROM MAY '17) (56) CAMERON PROUDFOOT										
	2.00	X						0	0	0
DIRECTOR (57) PURNENDU RAI										_
	2.00							0	0	0
DIRECTOR (58) HEATHER REMLEY										
(36) REALITER REPILET	2.00	Х						0	0	0
DIRECTOR (FROM NOV '17)										
(59) RICHARD RENNARD	2.00	Х						0	0	0
DIRECTOR										
(60) ROSS REUCASSEL	2.00	Х						0	0	0
DIRECTOR	•••	^						O	Ü	0
(61) DANNY REY	2.00	V						0	0	
DIRECTOR	•••	×						0	U	0
(62) LANE RIGGS	2.00									,
DIRECTOR		X						0	0	0
(63) DAN ROBINSON	2.00									
DIRECTOR		X						0	0	0
(64) DAN ROMASKO (A)	(B)			(C)				(D)	(E)	(F)
Name and Title	Average ^{2.00} 'hours'per'''	xPos more				check		Reportable ₀ compensation	Reportable ₀ compensation	Estimated ₀ amount of other
DIRECTOR (65) TOM SCHMITT	week (list	pers	on is	both	an	office	55 r	from the	from related	compensation
	any hours follo	and				ustee		organization (W-0	organizations ₀	from the $_0$
DIRECTOR (66) JOHN EDWARD SCHUMANN	···related····· organizations	오늘	=	2	줎	독은	77	2/1099-MISC)	(W- 2/1099- MISC)	organization and related
(66) JOHN EDWARD SCHUMANN	organizations below dotted ⁰ line)	<u>₽</u> .₩	Institutional	Officer	Key employee	疲물	Former	0	0	organizations ₀
DIRECTOR (FROM MAR '17)	····line)·····	8 5	utic	æ	á	ist)ye	Œ,			
(67) DENNIS SEITH	2.00	of X	ona		юy	e on		0	0	0
DIRECTOR		g	Ħ		99	adu		Ů	Ü	
(68) SCOTT SHARP	2.00	r Xustae×	Truste			ans:		0	0	0
DIRECTOR (FROM OCT '17)	···.	^	99		L	Highest compensated employee				
(69) LUIS SIERRA	2-0.0					2				

DIRECTOR	2.00	Х					0	0	0
(70) MATTHEW SMORCH	2.00								
DIRECTOR	2.00	X					0	0	0
(71) DOUG SPARKMAN	2.00								
DIRECTOR	2.00	X					0	0	0
(72) SRIDHAR SRINIVASAN	2.00								
DIRECTOR	2.00	X					0	0	0
(73) SIMON UPFILL-BROWN	2.00								
DIRECTOR	2.00	X					0	0	0
(74) TOMELL VADELL	2.00								
DIRECTOR (FROM APR '17)	2.00	X					0	0	0
(75) JOSEPH A VETRONE	2.00								
DIRECTOR	2.00	X					0	0	0
(76) MIKE WALSH	2.00								
DIRECTOR (FROM OCT '17)	2.00	X					0	0	0
(77) IERRY WASCOM	2.00			t					
DIRECTOR		×					0	0	0
(78) DUSS WILLMON	2.00								
DIRECTOR	2.00	X					0	0	0
(79) GREG WILLMS	2.00								
DIRECTOR	2.00	X					0	0	0
(80) BRIAN ZOLKOS	2.00								
DIRECTOR	2.00	X					0	0	0
(81) CHET THOMPSON	40.00								
PRESIDENT & CEO	40.00	X		Х			1,626,110	0	254,432
(82) RICHARD MOSKOWITZ	40.00								
GENERAL COUNSEL	40.00			Х			326,930	0	37,440
(83) GERALD VAN DE VELDE	40.00								
CFO	40.00			Х			371,513	0	47,065
(84) BRENDAN WILLIAMS	40.00								
EVP (TO JAN '17)	40.00			Х			71,281	0	9,415
(85) SUSAN YASHINSKIE	40.00								
SVP/MEMBER SERVICES	40.00				Х		320,888	0	35,903
(86) DERRICK MORGAN	40.00								
SVP/FEDERAL AFFAIRS	40.00				Х		253,393	0	23,384
(87) JAIME ZARRABY	40.00								
SVP/COMMUNICATIONS					Х		195,905	0	10,273
(88) DAVID FRIEDMAN	40.00								
VP/REGULATORY AFFAIRS	40.00					Х	325,896	0	56,400
(89) JIM MCCLOSKEY	40.00								
VP/PETROCHEMICALS	40.00					Х	260,513	0	35,414
(90) REBECCA ADLER	40.00			t					
SR. DIRECTOR/COMMUNICATIONS	40.00	ļ				Χ	218,733	0	27,567
(91) GEOFF MOODY	40.00								
VP/GOVERNMENT RELATIONS	40.00	.				Х	215,680	0	27,795
(92) HELEN KUTSKA	40.00								
SR. DIRECTOR/CONVENTION SERVICES	40.00	.				Х	203,400	0	26,165
1b Sub-Total	<u>.</u>		-		-	•	 <u> </u>	<u> </u>	
c Total from continuation sheets to Part					i	- t			
d Total (add lines 1b and 1c))	•	4,390,242	0	591,253

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 27

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes	

5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for		i
	services rendered to the organization? If "Yes," complete Schedule J for such person	5	No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
DANIEL J EDELMAN	PUBLIC RELATIONS	4,241,193
200 E RANDOLPH ST CHICAGO, IL 60601		
SINGER ASSOCIATES INC	PUBLIC RELATIONS	4,080,436
47 KEARNY ST 2ND FLOOR SAN FRANCISCO, CA 94108		
DEZENHALL RESOURCES LTD	PUBLIC RELATIONS	1,500,546
2121 K ST NW STE 920 WASHINGTON, DC 20037		
SIDLEY AUSTIN LLP	LEGAL SERVICES	815,900
1501 K STREET NW WASHINGTON, DC 20005		
O'DONOVAN STRATEGIES LLC	STATE OUTREACH	781,000
1455 PENNSYLVANIA AVE NW STE 400 WASHINGTON, DC 20004		
2 Total number of independent contractors (including but not limited to those compensation from the organization > 38	listed above) who received more than \$100,000	of

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Part \		O contains a response or	r note to any line in t	this Part VIII .	<u> </u>	<u>.</u>	🗆
				(A) revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0	1a Federated campaigns	1a	<u>'</u>	•	•		
m ts	b Membership dues .	. 1b					
Gra	c Fundraising events .	. 1c					
Ę, Ę	d Related organizations	1d					
ia i	e Government grants (cont	ributions) 1e					
Contributions, Giffs, Grants and Other Similar Amounts	f All other contributions, gi and similar amounts not i above	fts, grants, included 1f					
Contribuand Oth							
ರ ಹ	h Total.Add lines 1a-1f		<u> </u>				
ne			Business Code				
wen	2a MEMBERSHIP DUES		900099	32,967,1		5	0.530.460
200	b MEETINGS		511190	8,529,4 271,9		5	8,529,469
Š	d SAFETY STATISTICS AND A	AWARDS PROG	900099	89,1	_		
S							
ram	f All other program servi	ce revenue					
Program Service Revenue	g Total.Add lines 2a-2f		41,857,681				
Other Revenue	4 Income from investment 5 Royalties 6a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) . 8a Gross income from funcinot including \$ contributions reported See Part IV, line 18 . b Less: direct expenses c Net income or (loss) from Gross income from gan See Part IV, line 19 .	(i) Real (ii loss) (i) Securities (18,463,998 17,978,996 485,002 draising events of on line 1c) a b om fundraising events	Personal iii) Other	485,002			485,002
	b Less: direct expenses c Net income or (loss) fro	ь					

10aGross sales of inventory, less returns and allowances a					
b Less: cost of goods sold b		1			
c Net income or (loss) from sales of invent	ory >	_			
Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue		1,308			1,308
e Total. Add lines 11a-11d	•	1,308			
12 Total revenue. See Instructions	· · · •	43,286,108	33,328,212	0	9,957,896

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any	_			✓
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,187,359	,	general enparate	1
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,583,932			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,179,219			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	214,317			
9 Other employee benefits	1,024,629			
10 Payroll taxes	506,813			
11 Fees for services (non-employees):				
a Management				
b Legal	233			
c Accounting	77,217			
d Lobbying	137,617			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	12,909,786			
12 Advertising and promotion	594,662			
13 Office expenses	619,932			
14 Information technology	246,129			
15 Royalties				
16 Occupancy	829,571			
17 Travel	759,981			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	3,069,895			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	247,258			
23 Insurance	142,919			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a GENERAL OPERATING EXPEN	1,433,269			
b BIOFUELS OUTREACH	1,353,178			
c POLITICAL CONTRIBUTIONS	757,000			
d DUES & SUBSCRIPTIONS	734,901			
e All other expenses	659,280			
25 Total functional expenses. Add lines 1 through 24e	37,269,097			

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				
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Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part IX			🗆
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	300	1	300
	2	Savings and temporary cash investments	9,058,454	2	4,762,356
Assets	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	801	4	3,263
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	440.044	8	000 004
	9	Prepaid expenses and deferred charges	442,814	9	898,224
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 3,453,531			
	b	Less: accumulated depreciation 10b 2,188,451	469,878	10 c	1,265,080
	11	Investments—publicly traded securities .	22,638,433	11	27,432,383
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	718,872	15	1,101,361
	16	Total assets. Add lines 1 through 15 (must equal line 34)	33,329,552	16	35,462,967
	17	Accounts payable and accrued expenses	4,095,743	17	4,189,132
	18	Grants payable		18	
	19	Deferred revenue	13,804,775	19	8,835,026
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>.</u>		persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
		Other liabilities (including federal income tax, payables to related third parties,	2,675,357	25	2,582,609
	25	and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,010,001	25	2,002,003
	26	Total liabilities. Add lines 17 through 25	20,575,875	26	15,606,767
or Fund Balances	27	Organizations that follow SFAS 117 (ASC 958), check here ► ☑ and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	12,753,677	27	19,856,200
ala		<u></u>	12,755,077	28	19,030,200
18	28	Temporarily restricted net assets			
Jur	29	Permanently restricted net assets		29	
or Fu	20	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.		20	
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds	10.750.077	32	40.050.000
Net	33	Total net assets or fund balances	12,753,677	33	19,856,200
1000	34	Total liabilities and net assets/fund balances	33,329,552	34	35,462,967

Par	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				\checkmark
		_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			286,108
2	Total expenses (must equal Part IX, column (A), line 25)	2			269,097
3	Revenue less expenses. Subtract line 2 from line 1	3			017,011
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			753,677
5	Net unrealized gains (losses) on investments	5		1,	283,172
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			197,660
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		19,	856,200
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			 Yes	No
1 2a	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both:	n a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate tonsolidated basis, or both:	basis,			
	☐ Separate basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	dule O			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	red	3b		
				0 km 00	(004=)

Additional Data Return to Form

Software ID: Software Version:

Form 990, Special Condition Description:

Special Condition Description